(101) Certification - Reporting Carrier		FCC Form 690 Approved by OMB OMB Control No. 3060-1185 Page 7 of 8
<010> Study Area Code	278019	

<010>	Study Area Code	278019
<015>	Study Area Name	Central Louisiana Cellular, LLC
<020>	Program Year	2015
<030>	Contact Name - Person USAC should contact regarding this data	Ana Bataille
<035>	Contact Telephone Number - Number of person identified in data line <030>	6105356911 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	abataille@cellonenation.com

TO BE COMPLETED BY THE REPORTING CARRIER, IF THE REPORTING CARRIER IS FILING ON ITS OWN BEHALF:

I certify that I am an officer of the reporting carrier; my responsibilities include en best of my knowledge, the information reported on this form and in any attachm	nsuring the accuracy of the reporting requirements for Mobility Fund recipients; and, to the ents is accurate.
Name of Reporting Carrier: Central Louisiana Cellular, LLC	
Signature of Authorized Officer: CERTIFIED ONLINE	Date 06/24/2015
Printed name of Authorized Officer: Ana Bataille	
Title or position of Authorized Officer:	
Telephone number of Authorized Officer: 6105356911 ext.	300W 144 W
Study Area Code of Reporting Carrier: 278019	Filing Due Date for this form: 07/01/2015

under Title 18 of the United States Code, 18 U.S.C. § 1001.

(102) Cer	tification - Agent / Carrier	FCC Form 690 Approved by OMB OMB Control No. 3060-1185 Page 8 of 8
<010>	Study Area Code	278019
<015>	Study Area Name	Central Louisiana Cellular, LLC
<020>	Program Year	2015

Ana Bataille

6105356911 ext.

abataille@cellonenation.com

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING ON THE CARRIER'S BEHALF:

<030> Contact Name - Person USAC should contact regarding this data

<035> Contact Telephone Number - Number of person identified in data line <030>
<039> Contact Email Address - Email Address of person identified in data line <030>

I certify that (Name of Agent)	is authorized to submit the information reported on behalf of the report	ing carrier. I
also certify that I am an officer of the reporting carrier; m	sponsibilities include ensuring the accuracy of the data reporting requirements provided to the authorize	ed
agent; and, to the best of my knowledge, the reports and	a provided to the authorized agent is accurate.	
Name of Authorized Agent:		
Name of Reporting Carrier:		
Signature of Authorized Officer:	Date:	-
Printed name of Authorized Officer:		
Title or position of Authorized Officer:		
Telephone number of Authorized Officer:	De 3 10 10 10 10 10 10 10 10 10 10 10 10 10	1100
Study Area Code of Reporting Carrier:	Filing Due Date for this form:	

TO BE COMPLETED BY THE AUTHORIZED AGENT:

Certification of Agent Autho	prized to File for Mobility Fund Recipients on Beha	alf of Reporting Carrier
. 10 분인 보다 및 10 전 15 전	norized to submit the reports for Mobility Fund recipients carrier; and, to the best of my knowledge, the information	on behalf of the reporting carrier; I have provided the data on reported herein is accurate.
Name of Reporting Carrier:	- while the will but - which	**
Name of Authorized Agent or Employee of Agent:		
Signature of Authorized Agent or Employee of Agent:		Date:
Printed name of Authorized Agent or Employee of Agent:	- *-	
Title or position of Authorized Agent or Employee of Agen	nt	
Telephone number of Authorized Agent or Employee of A	gent:	3- 10-10-10-10-10-10-10-10-10-10-10-10-10-1
Study Area Code of Reporting Carrier:	Filing Due Date for this form:	

Attachments

(060) Co	verage and Performance Report	FCC Form 690 Approved by OMB OMB Control No. 3060 1185
<010>	Study Area Code	278019
<015>	Study Area Name	Central Louisiana Cellular, LLC
<020>	Program Year	2015
<030>	Contact Name - Person USAC should contact regarding this data	Ana Bataille
<035>	Contact Telephone Number - Number of person identified in data line <030>	6105356911 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	abataille@cellonenation.com
<140>	Coverage and Performance Report Year	08/2014 - 07/2015

<141>

. . . .

<a1></a1>	<a2></a2>	<a3></a3>	 	< 62>	<b3></b3>	<c1></c1>	<02>	<c3></c3>	<d> <d> </d></d>
State	County	Census Block	Resident Population per Census Block	Resident Population Newly Reached by Service	Total Resident Population Reached by Service	Road Miles per Census Block	Road Miles per Census Block Newly Reached	Total Road Miles covered per Census Block	Certify that Coverage and Performacne data is uploaded (yes/no)
LA	Vernon	0000	0	0	0	0.0	0.0	0.0	Yes
						1			VIII - 23
						1			
				2					
						1			
		100		San Carlotte		 			ž že
				N 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1					
						1			
						-			
							1		
			3 - 10 - 10 - 10 - 10 - 10 - 10 - 10 - 1					and the same of th	
									-
			1			1			

Percentage of
Total Population
Reached by
Service

0			

Percentage of Total Road Miles covered by Service

0			

FCC Form 690 - Coverage and Performance Data Update

Central Louisiana Cellular, LLC ("Central LA" or "the Company") has completed construction and deployment with respect to the SAC associated with this filing. Drive testing is ongoing throughout those census tracts for which the Company has been authorized to receive awards, with all drive testing and disbursement request filings to be completed in advance of the Company's construction deadline of August 9, 2015. On or prior to that date, Central LA will submit these filings, which will include the required coverage and performance data. Please reference the Company's disbursement request filings for additional coverage and performance information.

Central Louisiana Cellular, LLC Form 690 – Annual Report for August 2014 – July 2015

Project Status Description

Item: SAC 278019

County/State: Vernon, LA

Total Award Amount: \$141,966.00

Project Description

The initial Project Description for this project was filed by Central Louisiana Cellular, LLC ("Central LA" or "the Company") on November 1, 2012, accompanying its Form 680 long form application. The Company updated this information in its 2014 Mobility Fund Phase I Annual Report, filed July 29, 2014. Both filings are incorporated herein by reference. The current update of material changes to the Project Description information previously provided for this census tract is as follows. Central LA has completed network design, construction, and deployment of the contemplated upgrades to its network. The upgrades have been tested and launched into commercial service. The network is now serving customers in this census tract with mobile broadband as well as voice services. The project remains within total amounts budgeted. The Company remains firmly committed to complying with all regulatory obligations associated with the support. Central LA has commenced its monthly, semiannual and annual maintenance reviews at each cell site, and will obtain third-party maintenance services and replacement equipment from its vendors as applicable.

100 C 100 C 100 C	Fund §54.1009 Annual Reporting lection Form		FCC Form Approved by OMB OMB 3060-1183 Avg. Burden Estimate per Respondent: 18 Hours
<010>	Study Area Code	278020	
<015>	Study Area Name	Central Louisiana Cellular, LLC	
<020>	Program Year	2015	Accepted / Filed
<030>	Contact Name: Person USAC should contact with questions about this data	Ana Bataille	JUN 25 2015
<035>	Contact Telephone Number: Number of the person identified in data line <030>	6105356911 ext.	Federal Communications
<039>	Contact Email: Email of the person identified in data line <030>	abataille@cellonenation.com	Office of the Secretary
Walter Co		and the second of the second o	
<040>	Has the information required pursuant to §54.1009 <041> Attach a description of the documents file <042> Cite the Study Area Code (SAC) for the Formation (SAC)	ed with the Form 481 reporting	<041>
<050>	Carrier Contact Information	(complete attached worksheet)	<050>
<060>	Coverage and Performance Report	(complete attached worksheet)	<060>
<070>	<u>Urban Rate Comparability Certification</u>	(complete attached certification)	<070>
<080>	Tribal Lands Reporting (y/n?) (Does this study area cov	er tribal lands? Yes or No)	0 0
		(If yes, complete the attached worksheet)	<080>
<090>	Project Update Information	(complete attached worksheet)	<090>
<100>	(1997) William (1997) (lete attached certification) lete attached certification)	<101>

Notice to Individuals Required by the Paperwork Reduction Act of 1995

OMB Control Number 3060-1185 (Annual Report for Mobility Fund Phase I Support, FCC Form 690 and Record Retention Requirements) Notice to Individuals Required by the Paperwork Reduction Act of 1995

Public reporting burden for this collection of information is estimated to average 18 hours per response. Our estimate includes the time to read the instructions, look through existing records, gather and maintain required data, and actually complete and review the form or response. If you have any comments on this estimate, or on how we can improve the collection and reduce the burden it causes you, please write the Federal Communications Commission, Office of Managing Director, AMD-PERM, Washington, DC 20554, Paperwork Reduction Act Project (3060-1185). Please DO NOT SEND COMPLETED FORMS TO THIS ADDRESS. You are not required to respond to a collection of information sponsored by the Federal government, and the government may not conduct or sponsor this collection, unless it displays a currently valid OMB control number and/or we fail to provide you with this notice. This collection has been assigned an OMB control number of 3060-1185.

THIS NOTICE IS REQUIRED BY THE PAPERWORK REDUCTION ACT OF 1995, PUBLIC LAW 104-13, OCTOBER 1, 1995, 44 U.S.C. SECTION 3507.

(050) Carr	ier Contact Form		FCC Form 690 Approved by OMB OMB Control No. 3060-1185 Page 2 of 8
<010>	Study Area Code	278020	
<015>	Study Area Name	Central Louisiana Cellular, LLC	20
<020>	Program Year	2015	411
<030>	Contact Name - Person USAC should contact regarding the	11 11 11 11 11 11 11 11 11 11 11 11 11	
<035> <039>	Contact Telephone Number - Number of person identified Contact Email Address - Email Address of person identified	dia data (II-a -020-	
	Carrier / Mobility Fund Phase 1 Winning Bidder	abataille@cellonenation.com	1- <u>1</u> 2
<110>	FCC Registration Number	020165593	
<111>		Central Louisiana Cellular, LLC	
<112>	Teach Teachers and the second	entral Louisiana Cellular, LLC	
<113>		170 Devon Park Drive, Suite 104	- 1-4
<114>		layne	
<115>	Control of the contro		
	A STATE OF THE STA	A	
<116>	-	9087	-
<117>		105356911 ext.	
<118>		106885209	2 2
<119>	Email Address	bataille@cellonenation.com	
<pre><120> <121> <122> <122> <123> <124> <125> <126> <127> <128></pre>	Filing Carrier Name Street Address (or PO Box) City State Zip-Code Telephone Number Fax Number Fax Number Fax Number	na Bataille entral Louisiana Cellular, LLC 170 Dewon Park Drive Suite 104 ayne A 9087 105356911 ext. 106885209 bataille@cellonenation.com	
	d Agent Information if no agent, indicate in this box		
<130>	Name (First, MI, Last, Suffix)	Control Control	
<131>	Company		
<132>	Street Address (or PO Box)		- (0-1) - 0
<133>	City		
<134>	State		
<135>	Zip-Code		
<136>	Telephone Number		•
<137>	Fax Number	200	
<138>	Email Address		
	_	· · · · · · · · · · · · · · · · · · ·	* 1/2000 - 1000

(060) Co	verage and Performance Report	FCC Form 690 Ap proved by OMB OMB Control No. 3060-1185 Page 3 of 8
<010>	Study Area Code	278020
<015>	Study Area Name	Central Louisiana Cellular, LLC
<020>	Program Year	2015
<030>	Contact Name - Person USAC should contact regarding this data	Ana Bataille
<035>	Contact Telephone Number - Number of person identified in data line <030>	6105356911 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	abataille@cellonenation.com
<140>	Coverage and Performance Report Year 08/2014 - 07/2015	
	278020_CPRd Coverage and Performace attachements	LA.zip

<141> <bb <b2> <b3> <c1> <c2> <c3> Total Certify that Road Road Miles per Road Miles Coverage and **Total Resident** Resident Miles Census covered Performance data Population Resident Population Block is uploaded Population per **Newly Reached** Reached by Census (Yes/no) Newly Census State County Census Block Census Block by Service Service Block Reached Block -- See attached worksheet Percentage of Total Percentage of Total Population Reached by Road Miles covered Service by Service

(070) Url	en Rate Comparability Certification Compliance	FCC Form 690 Approved by OMB OMB Control No. 3060-1185 Page 4 of 8
<010>	Study Area Code	278020
<015>	Study Area Name	Central Louisiana Cellular, LLC
<020>	Program Year	2015
<030>	Contact Name - Person USAC should contact regarding this data	Ana Bataille
<035>	Contact Telephone Number - Number of person identified in data line <030>	6105356911 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	abataille@cellonenation.com

TO BE COMPLETED BY THE REPORTING CARRIER, IF THE REPORTING CARRIER IS FILING CERTIFICATION DATA ON ITS OWN BEHALF:

Certification of Officer or Employee as to Compliance with 47 CFR §54.1009(a)(4)					
I certify that I am an officer or employee of form and in any attachments is accurate.	the reporting carrier; my responsib	ilities include ensuring compliance	with 47 CFR §54.1009(a)(4), the information reported on this	
Name of Reporting Carrier: Cent	ral Louisiana Cellular, LLC				
Signature of Authorized Officer:	CERTIFIED ONLINE			Date 06/24/2015	
Printed name of Authorized Officer:	Ana Bataille				
Title or position of Authorized Officer:	Tax & Regulatory Manager		Walland Wall		
Telephone number of Authorized Officer:	6105356911 ext.				
Study Area Code of Reporting Carrier:	278020	Filing Due Date for this form:	07/01/2015		

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING CERTIFICATION DATA ON THE CARRIER'S BEHALF:

is authorized to submit the information reported on behalf of the reporting ting carrier; my responsibilities include ensuring compliance with 47 CFR §54.1009(a)(4) reported to the nd data provided to the authorized agent is accurate.
Date:
Filing Due Date for this form:

TO BE COMPLETED BY THE AUTHORIZED AGENT:

Certification of Agent Authoriz	ed to File Compliance with 47 CFR §54.1009(a)(4) on Behalf of Reporting Carrier
I, as agent for the reporting carrier, certify that I am author data provided by the reporting carrier; and, to the best of m	zed to submit the certification on behalf of the reporting carrier; I have provided the data reported herein based on By knowledge, the information reported herein is accurate.
Name of Reporting Carrier:	
Name of Authorized Agent or Employee of Agent:	
Signature of Authorized Agent or Employee of Agent:	Date:
Printed name of Authorized Agent or Employee of Agent:	
Title or position of Authorized Agent or Employee of Agent	
Telephone number of Authorized Agent or Employee of Age	at:
Study Area Code of Reporting Carrier:	Filing Due Date for this form:

(080) Triba	al Lands Reporting			FCC Form 690 Approved by OMB OMB Control No. 3060-1185 Page 5 of 8
<010>	Study Area Code	William Service Co.	278020	
<015>	Study Area Name		Central Louisiana Cellular, LLC	
<020>	Program Year		2015	
<030>	Contact Name - Person USAC should contact regarding Contact Telephone Number - Number of person identif		Ana Bataille	
<039>	Contact Email Address - Email Address of person identif		The state of the s	-
<142>	State	6	DOGERAL ESCALATION AND LOSS	
<143>	County			
<144>	Tribal Land(s) on which ETC Serves			
<145>	Tribal Government Engagement Obligation	Name of Attached	d Document (.pdf)	
	If your company serves Tribal lands, please select (Yes, each of these boxes to confirm the status described on PDF, on line 145, demonstrates coordination with the government pursuant to § 54.1004 includes:	the attached	ole) for	
<146>	Needs assessment and deployment planning with a foc community anchor institutions;	cus on Tribal	Select (Yes, No, Not Applicable)	
<147>	Feasibility and sustainability planning;			
<148>	Marketing services in a culturally sensitive manner;			
<149>	Compliance with Rights of way processes			
<150>	Compliance with Land Use permitting requirements			
<151>	Compliance with Facilities Siting rules			
<152>	Compliance with Environmental Review processes			
<153>	Compliance with Cultural Preservation review processe	s		

<154> Compliance with Tribal Business and Licensing requirements.

(090) Projec	t Update Information	FCC Form 690 Approved by OMB	
		OM8 Control No. 3060-1185 Page 6 of 8	
			200
<010>	Study Area Code	278020	
<015>	Study Area Name	Central Louisiana Cellular, LLC	
<020>	Program Year	2015	
<030>	Contact Name - Person USAC should contact regarding this data	Ana Bataille	
<035>	Contact Telephone Number - Number of person identified in data line <030>	6105356911 ext.	
<039>	Contact Email Address - Email Address of person identified in data line <030>	abataille@cellonenation.com	
			model
<200>	Date Authorized to Receive Support	08/08/2013	
<201>	Targeted Completion Date	08/09/2015	
<202>	Total Mobility Fund Support Awarded	236334.00	
<203>	Total Mobility Fund Support Disbursed	78778.00	
<210>	Actual Completion Date		
-211	Desired Chatter Description (association	278020 PSD LA.pdf	
<211>	Project Status Description (attached)		
		{Name of PDF attached}	
	Please check these boxes below to confirm that the attached PDF, on line		
	211, contains a project status pursuant to §54.1005(b)(2)(v). The information		
	shall be submitted as appropriate.		
<212>	Status of Network Deployment - Network Design		
<213>	Status of Network Deployment - Construction		
<214>	Status of Network Deployment - Deployment		
	Status of Network Deployment - Maintenance		
<215>	The management of the confliction and the contract of the cont		
<215> <216>	Project Budget Status	· √ ·	
	Project Budget Status Project Plan Status	 	
<216>	5	300	

(101) Cert	ification - Reporting Carrier	FCC Form 690 Approved by OMB OMB Control No. 3060-1185 Page 7 of 8
<010>	Study Area Code	278020
<015>	Study Area Name	Central Louisiana Cellular, LLC
<020>	Program Year	2015
<030>	Contact Name - Person USAC should contact regarding this data	Ana Bataille
<035>	Contact Telephone Number - Number of person identified in data line <030>	6105356911 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	abataille@cellonenation.com

TO BE COMPLETED BY THE REPORTING CARRIER, IF THE REPORTING CARRIER IS FILING ON ITS OWN BEHALF:

I certify that I am an officer of the reportin best of my knowledge, the information rep	하나 가게 하는데 맛이 되었다. 이렇게 살아 되면 이렇게 하게 하게 되었다.	그렇게 있다는 것이 되었습니다. 그리는 그렇게 되었다면 하는 것이 없는 것이 없는 것이 없는 것이 없는 것이 없는 것이 없다면	ing requirements for Mobili	ty Fund recipients; and, to the
Name of Reporting Carrier: Central	Louisiana Cellular, LLC	V-20-		
Signature of Authorized Officer:	ERTIFIED ONLINE	V-66		Date 06/24/2015
Printed name of Authorized Officer:	na Bataille			Liste in . it
Title or position of Authorized Officer:	Tax & Regulatory Manager			
Telephone number of Authorized Officer:	6105356911 ext.	-		
Study Area Code of Reporting Carrier:	278020	Filing Due Date for this form:	07/01/2015	

(102) Certification - Agent / Carrier		FCC Form 690 Approved by OMB OMB Control No. 3060-1185 Page 8 of 8
<010> Study Area Code	278020	

Coltos Study Area Code Contract Name - Person USAC should contact regarding this data Contact Name - Person USAC should contact regarding this data Ana Bataille Contact Telephone Number - Number of person identified in data line <030> Contact Email Address - Email Address of person identified in data line <030> abataille@cellonenation.com

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING ON THE CARRIER'S BEHALF:

certify that (Name of Agent) is authorized to submit the information reported on behalf of the reporting carrier. so certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the data reporting requirements provided to the authorized gent; and, to the best of my knowledge, the reports and data provided to the authorized agent is accurate.				
Name of Authorized Agent:				
Name of Reporting Carrier:				
Signature of Authorized Officer:	Date:			
Printed name of Authorized Officer:				
Title or position of Authorized Officer:				
Telephone number of Authorized Officer:				
Study Area Code of Reporting Carrier:	Filing Due Date for this form:			

TO BE COMPLETED BY THE AUTHORIZED AGENT:

Certification of Agent Autho	rized to File for Mobility Fund Recipients on Behalf of Re	eporting Carrier
하는 그를 거짓을 다른 것도 하면서 그렇게 그래요? 그렇게 걸로 그녀를 다했다.	orized to submit the reports for Mobility Fund recipients on beha carrier; and, to the best of my knowledge, the information report	
Name of Reporting Carrier:	***************************************	
Name of Authorized Agent or Employee of Agent:		
Signature of Authorized Agent or Employee of Agent:	22222	Date:
Printed name of Authorized Agent or Employee of Agent:		
litle or position of Authorized Agent or Employee of Agen	nt	
Telephone number of Authorized Agent or Employee of A	gent:	
Study Area Code of Reporting Carrier:	Filing Due Date for this form:	

Attachments

(060) Co	verage and Performance Report	FCC Form 690 Approved by OMB OMB Control No. 3060-1185
<010>	Study Area Code	278020
<015>	Study Area Name	Central Louisiana Cellular, LLC
<020>	Program Year	2015
<030>	Contact Name - Person USAC should contact regarding this data	Ana Bataille
<035>	Contact Telephone Number - Number of person identified in data line <030>	6105356911 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	abataille@cellonenation.com
<140>	Coverage and Performance Report Year	08/2014 - 07/2015

(a1) (a2) (a5) (b1) (b2) (b3) (c1) (c2) (c3) <141> Certify that **Total Road** Coverage and Resident **Total Resident Road Miles** Miles Performacne Population per Census Resident Population **Road Miles** covered per data is uploaded Newly Reached by Service Reached by **Block Newly** Population per per Census Census Block (yes/no) Census Block Census Block Service Reached County Block Vernon LA 0 Yes 0.0 0.0

> Percentage of Total Population Reached by Service

0

Percentage of Total Road Miles covered by Service

0		

FCC Form 690 - Coverage and Performance Data Update

Central Louisiana Cellular, LLC ("Central LA" or "the Company") has completed construction and deployment with respect to the SAC associated with this filing. Drive testing is ongoing throughout those census tracts for which the Company has been authorized to receive awards, with all drive testing and disbursement request filings to be completed in advance of the Company's construction deadline of August 9, 2015. On or prior to that date, Central LA will submit these filings, which will include the required coverage and performance data. Please reference the Company's disbursement request filings for additional coverage and performance information.

Central Louisiana Cellular, LLC Form 690 – Annual Report for August 2014 – July 2015

Project Status Description

Item: SAC 278020

County/State: Vernon, LA

Total Award Amount: \$236,334.00

Project Description

The initial Project Description for this project was filed by Central Louisiana Cellular, LLC ("Central LA" or "the Company") on November 1, 2012, accompanying its Form 680 long form application. The Company updated this information in its 2014 Mobility Fund Phase I Annual Report, filed July 29, 2014. Both filings are incorporated herein by reference. The current update of material changes to the Project Description information previously provided for this census tract is as follows. Central LA has completed network design, construction, and deployment of the contemplated upgrades to its network. The upgrades have been tested and launched into commercial service. The network is now serving customers in this census tract with mobile broadband as well as voice services. The project remains within total amounts budgeted. The Company remains firmly committed to complying with all regulatory obligations associated with the support. Central LA has commenced its monthly, semiannual and annual maintenance reviews at each cell site, and will obtain third-party maintenance services and replacement equipment from its vendors as applicable.

100000000000000000000000000000000000000	Fund §54.1009 Annual Reporting lection Form		FCC Form Approved by OMB OMB 3060-1185 Avg. Burden Estimate per Respondent: 18 Hours
<010>	Study Area Code	278021	
<015>	Study Area Name	Central Louisiana Cellular, LLC	
<020>	Program Year	2015	Accepted / Filed
<030>	Contact Name: Person USAC should contact with questions about this data	Ana Bataille	JUN 25 2015
<035>	Contact Telephone Number: Number of the person identified in data line <030>	6105356911 ext.	Federal Communications Commission Office of the Socretary
<039>	Contact Email: Email of the person identified in data line <030>	abataille@cellonenation.com	
	<041> Attach a description of the documents fill <042> Cite the Study Area Code (SAC) for the Fo		<041>
	<042> Cite the Study Area Code (SAC) for the Fo	orm 481 reporting	<042>
<050>	Carrier Contact Information	(complete attached worksheet)	<050>
<060>	Coverage and Performance Report	(complete attached worksheet)	<060>
<070>	Urban Rate Comparability Certification	(complete attached certification)	<070>
<080>	Tribal Lands Reporting (y/n?) (Does this study area cov	er tribal lands? Yes or No)	\circ
		(If yes, complete the attached worksheet)	<080>
<090>	Project Update Information	(complete attached worksheet)	<090>
<100>	Certifications <101> Reporting Carrier Certification (comp	olete attached certification)	<101>
	<102> Agent Certification (come	alete attached certification)	<102>

Notice to Individuals Required by the Paperwork Reduction Act of 1995

OMB Control Number 3060-1185 (Annual Report for Mobility Fund Phase I Support, FCC Form 690 and Record Retention Requirements) Notice to Individuals Required by the Paperwork Reduction Act of 1995

Public reporting burden for this collection of information is estimated to average 18 hours per response. Our estimate includes the time to read the instructions, look through existing records, gather and maintain required data, and actually complete and review the form or response. If you have any comments on this estimate, or on how we can improve the collection and reduce the burden it causes you, please write the Federal Communications Commission, Office of Managing Director, AMD-PERM, Washington, DC 20554, Paperwork Reduction Act Project (3060-1185). Please DO NOT SEND COMPLETED FORMS TO THIS ADDRESS. You are not required to respond to a collection of information sponsored by the Federal government, and the government may not conduct or sponsor this collection, unless it displays a currently valid OMB control number and/or we fail to provide you with this notice. This collection has been assigned an OMB control number of 3060-1185.

THIS NOTICE IS REQUIRED BY THE PAPERWORK REDUCTION ACT OF 1995, PUBLIC LAW 104-13, OCTOBER 1, 1995, 44 U.S.C. SECTION 3507.

(050) Can	fer Contact Form			FCC Form 690 Approved by OMB OMB Control No. 3060-1185 Page 2 of 8
<010>	Study Area Code		278021	
<015>	Study Area Name	3	Central Louisiana Cellular, LLC	
<020>	Program Year		2015	
<030>	Contact Name - Person USAC should contact regarding this		Ana Bataille	V 42,
<035>	Contact Telephone Number - Number of person identified		6105356911 ext.	
<039>	Contact Email Address - Email Address of person identified Carrier / Mobility Fund Phase 1 Winning Bidder	in data line <030>	abataille@cellonenation.com	-
<110>	12222200 a 1000 a 1	020165593		V-30
<111>	reas references	entral Louisiana C	ellular, LLC	
<112>	Termination and program	entral Louisiana C		
<113>		170 Devon Park Dri	- Xenes - Xene	
	A STATE OF THE PROPERTY OF THE PARTY OF THE		ve, suite iou	
<114>		ayne		
<115>	A STATE OF THE STA	'A		
<116>	- S	9087		
<117>	Telephone Number	105356911 ext.		
<118>	Fax Number 6	106885209		<u></u>
<119>	Email Address	bataille@cellonena	tion.com	
<120> <121> <122> <122> <123> <124> <125> <126> <127> <128>	Filing Carrier Name Street Address (or PO Box) City State Zip-Code Telephone Number Fax Number 61	na Bataille entral Louisiana Ce 170 Devon Park Driv ayne A 9087 105356911 ext. 106885209 bataille@cellonenat	ze. Suite 104	
Authorize	d Agent Information			
	if no agent, indicate in this box			
<130>	Name (First, MI, Last, Suffix)			
<131>	Company			
<132>	Street Address (or PO Box)			
<133>	City			
<134>	State			
	Total Control of Controls		11 - 00 - 11 - 11 - 11	·····
<135>	Zip-Code			
<136>	Telephone Number			-
<137>	Fax Number			
<138>	Email Address			are well

(060) Co	verage and Performance Report	Section of the sectio	d by OMB strol No. 3060-1185
<010>	Study Area Code	278021	
<015>	Study Area Name	Central Louisiana Cellular, LLC	
<020>	Program Year	2015	2
<030>	Contact Name - Person USAC should contact regarding this data	Ana Bataille	
<035>	Contact Telephone Number - Number of person identified in data line <030>	6105356911 ext.	3055000 C
<039>	Contact Email Address - Email Address of person identified in data line <030>	abataille@cellonenation.com	

08/2014 - 07/2015

<140>

Coverage and Performance Report Year

Percentage of Total

Population Reached by Service

278021_CPRd_LA.zip

Coverage and Performace attachements

<141> <a3> <b1> <b2> <b3> <c1> <c2> <c3> Total Road Road Certify that Road Miles per Miles Coverage and **Total Resident** Resident Miles Census covered Performance data is uploaded Resident Population Population Block per per Population per **Newly Reached** Reached by Census Newly Census (Yes/no) State County Census Block Census Block by Service Service Block Reached Block -- See attached worksheet

06/16/2015

Percentage of Total

Road Miles covered

by Service

(070) Uri	an Rate Comparability Certification Compliance	FCC Form 690 Approved by OMB OMB Control No. 3060-1185 Page 4 of 8
<010>	Study Area Code	278021
<015>	Study Area Name	Central Louisiana Cellular, LLC
<020>	Program Year	2015
<030>	Contact Name - Person USAC should contact regarding this data	Ana Bataille
<035>	Contact Telephone Number - Number of person identified in data line <030>	6105356911 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	abataille@cellonenation.com

TO BE COMPLETED BY THE REPORTING CARRIER, IF THE REPORTING CARRIER IS FILING CERTIFICATION DATA ON ITS OWN BEHALF:

C	Certification of Officer or	Employee as to Compliance with 47 CFR §54.1009(a)	(4)
certify that I am an officer or employee of form and in any attachments is accurate.	f the reporting carrier; my res	ponsibilities include ensuring compliance with 47 CFR §54.10	009(a)(4), the information reported on this
Name of Reporting Carrier: Cent	ral Louisiana Cellular,	LLC	
Signature of Authorized Officer:	CERTIFIED ONLINE		Date 06/24/2015
Printed name of Authorized Officer:	Ana Bataille		
Title or position of Authorized Officer:	Tax & Regulatory Manag	er	
Telephone number of Authorized Officer:	6105356911 ext.		
Study Area Code of Reporting Carrier:	278021	Filing Due Date for this form: 07/01/2015	

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING CERTIFICATION DATA ON THE CARRIER'S BEHALF:

I certify that (Name of Agent)	is authorized to submit the information reported on behalf of the reporting
	orting carrier; my responsibilities include ensuring compliance with 47 CFR §54.1009(a)(4) reported to the
authorized agent; and, to the best of my knowledge, the reports	and data provided to the authorized agent is accurate.
Name of Authorized Agent:	2-2-4
Name of Reporting Carrier:	
Signature of Authorized Officer or Employee:	Date:
Printed name of Authorized Officer or Employee:	
Title or position of Authorized Officer or Employee:	
Telephone number of Authorized Officer or Employee:	
Study Area Code of Reporting Carrier:	Filing Due Date for this form:

TO BE COMPLETED BY THE AUTHORIZED AGENT:

Certification of Agent Authorized to	File Compliance with 47 CFR §54.1009(a)(4) on Behalf of Reporting Carrier
as agent for the reporting carrier, certify that I am authorized to	submit the certification on behalf of the reporting carrier; I have provided the data reported herein based or
ata provided by the reporting carrier; and, to the best of my know	vledge, the information reported herein is accurate.
ame of Reporting Carrier:	
ame of Authorized Agent or Employee of Agent:	
gnature of Authorized Agent or Employee of Agent:	Date:
inted name of Authorized Agent or Employee of Agent:	
le or position of Authorized Agent or Employee of Agent	
lephone number of Authorized Agent or Employee of Agent:	
udy Area Code of Reporting Carrier:	Filing Due Date for this form:

Ionol with		65.6° 35.9° 22		
(USU) Tribe	al Lands Reporting			FCC Form 690 Approved by OMB
	名称 经被汇兑的 经海经济		。	OM8 Control No. 3060-1185
			《发表》,"我们就是一个	Page 5 of 8
		Pale William		
<010>	Study Area Code		278021	
<015>	Study Area Name		Central Louisiana Cellular, LLC	
<020>	Program Year		2015	
<030>	Contact Name - Person USAC should contact regarding th		Ana Bataille	
<035>	Contact Telephone Number - Number of person identifie Contact Email Address - Email Address of person identifie		· · · · · · · · · · · · · · · · · · ·	
(0332	Contact Email Address - Email Address of person identifie	eu iii uata iiiie <030	abataille@cellonenation.com	
<142>	State			
20-4-million-2020				
<143>	County			
	1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -			
<144>	Tribal Land(s) on which ETC Serves			
			1-7/-	
<145>	Tribal Government Engagement Obligation			
		Name of Attached Doo	cument (.pdf)	
	If your company serves Tribal lands, please select (Yes, N	lo, Not Applicable)	for	
	each of these boxes to confirm the status described on the	he attached		
	PDF, on line 145, demonstrates coordination with the Tr	ribal		
	government pursuant to § 54.1004 includes:			
		_		
			Select	
02020			res, No, Not Applicable)	
<146>	Needs assessment and deployment planning with a focu	us on Tribal		
	community anchor institutions;			
<147>	Feasibility and sustainability planning;	L		
<148>	Marketing services in a culturally sensitive manner;			
<149>	Compliance with Rights of way processes			
<150>	Compliance with Land Use permitting requirements	-		
-200	compliance with some one permitting requirements			

<151> Compliance with Facilities Siting rules

Compliance with Environmental Review processes

Compliance with Cultural Preservation review processes

Compliance with Tribal Business and Licensing requirements.

<152>

<153>

<154>

(090) Project	Update Information	FCC Form 690 Approved by OMB OMB Control No. 3060-1185 Page 6 of 8
<010>	Study Area Code	
<015>	Study Area Code Study Area Name	278021
<020>	Program Year	Central Louisiana Cellular, LLC 2015
<030>	Contact Name - Person USAC should contact regarding this data	Ana Bataille
<035>	Contact Telephone Number - Number of person identified in data line <030>	6105356911 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	
<200>	Date Authorized to Receive Support	08/08/2013
<201>	Targeted Completion Date	08/09/2015
<202>	Total Mobility Fund Support Awarded	168840.00
<203>	Total Mobility Fund Support Disbursed	56280.00
<210> <211>	Actual Completion Date Project Status Description (attached)	278021_PSD_LA.pdf
	Please check these boxes below to confirm that the attached PDF, on line 211, contains a project status pursuant to §54.1005(b)(2)(v). The information shall be submitted as appropriate.	{Name of PDF attached}
<212>	Status of Network Deployment - Network Design	
<213>	Status of Network Deployment - Construction	✓
<214>	Status of Network Deployment - Deployment	→
<215>	Status of Network Deployment - Maintenance	/
<216>	Project Budget Status	<u> </u>
<217>	Project Plan Status	✓
<218>	Certify Network will Support 3G/4G Mobile Service (Yes / No)	⊙ ○

(101) Cer	tification - Reporting Carrier		FCC Form 690 Approved by OMB OMB Control No. 3060-1185 Page 7 of 8
<010>	Study Area Code	278021	
		Control Louisiana Callular IIC	

<010>	Study Area Code	278021
<015>	Study Area Name	Central Louisiana Cellular, LLC
<020>	Program Year	2015
<030>	Contact Name - Person USAC should contact regarding this data	Ana Bataille
<035>	Contact Telephone Number - Number of person identified in data line <030>	6105356911 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	abataille@cellonenation.com

TO BE COMPLETED BY THE REPORTING CARRIER, IF THE REPORTING CARRIER IS FILING ON ITS OWN BEHALF:

I certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the reporting requirements for Mobility Fund recipients; and, to the best of my knowledge, the information reported on this form and in any attachments is accurate.							
Name of Reporting Carrier: Central Louisiana Cellular, LLC							
Signature of Authorized Officer:	CERTIFIED ONLINE			Date 06/24/2015			
Printed name of Authorized Officer:	Ana Bataille		The state of the s				
Title or position of Authorized Officer:	Tax & Regulatory Manager						
Telephone number of Authorized Officer	6105356911 ext.						
Study Area Code of Reporting Carrier:	278021	Filing Due Date for this form:	07/01/2015				

under Title 18 of the United States Code, 18 U.S.C. § 1001.